

APPLICATION DATA SHEET

Application Information

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| Application number:: | N/A |
| Filing Date:: | 09/12/03 |
| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested classification:: | N/A |
| Suggested Group Art Unit:: | N/A |
| CD-ROM or CD-R?:: | N/A |
| Number of CD disks:: | N/A |
| Number of copies of CDs:: | N/A |
| Sequence submission?:: | N/A |
| Computer Readable Form (CRF)?:: | N/A |
| Number of copies of CRF:: | N/A |
| Title :: | MONOLITHIC DOME STRUCTURE HAVING UNITARY CONTOURED LATERALLY MOVEABLE ACCESS DOOR |
| Attorney Docket Number:: | 89786 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | Yes |
| Suggested Drawing Figure:: | N/A |

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| Total Drawing Sheets:: | 3 |
| Small Entity?:: | Yes |
| Latin name:: | N/A |
| Variety denomination name:: | N/A |
| Petition included?:: | N/A |
| Petition Type:: | N/A |
| Licensed US Govt. Agency:: | N/A |
| Contract or Grant Numbers:: | N/A |
| Secrecy Order in Parent Appl.?:: | N/A |

Applicant Information

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|----------------------------------|---------------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | USA |
| Status:: | Full Capacity |
| Given Name:: | David |
| Middle Name:: | B. |
| Family Name:: | South |
| Name Suffix:: | N/A |
| City of Residence:: | Italy |
| State or Province of Residence:: | Texas |
| Country of Residence:: | USA |
| Street of mailing address:: | 177 Dome Park Place |
| City of mailing address:: | Italy |

State or Province of mailing address:: Texas
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 76651

Correspondence Information

Name:: Richard L. Wood
Street of mailing address:: 120 South Riverside Plaza, 22nd Floor
City of mailing address:: Chicago
State or Province of mailing address:: IL
Country of mailing address:: US
Postal or Zip Code of mailing address:: 60606-3945
Phone number:: 312-655-1500
Fax Number:: 312-655-1501
E-Mail address:: rlwdocket@WelshKatz.com

Representative Information

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|---------------------------------|-------|
| Representative Customer Number: | 24628 |
|---------------------------------|-------|

Domestic Priority Information

| Application:: | Continuity Type: | Parent Application:: | Parent Filing Date:: |
|------------------|------------------|----------------------|----------------------|
| This Application | | | |

Foreign Priority Information

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|---------------|--------------------|
| | | | |

Assignee Information

Assignee name:: N/A

Street of mailing address:: N/A

City of mailing address:: N/A

State or Province of mailing address:: N/A

Country of mailing address:: N/A

Postal or Zip Code of mailing address:: N/A